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DATE• June 14, 2004

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CLIENT / MATTER• 09799107-0006
FROM• W. John Keyes

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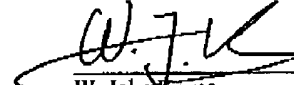
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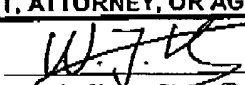
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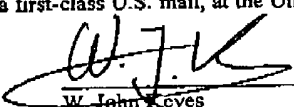
| | | | |
|---|----------------------|------------------------|---------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 09/856,431 | |
| | Filing Date | July 12, 2001 | |
| | First Named Inventor | Shigeru Fujita | |
| | Group Art Unit | 1746 | |
| | Examiner Name | Jonathan Crepeau | |
| Total Number of Pages in This Submission | 11 | Attorney Docket Number | 09799107-0006 |

| ENCLOSURES (check all that apply) | | | | | | |
|---|---|---|--|---|--|--------------------------|
| <input checked="" type="checkbox"/> Transmitted herewith is the Response to Notice of Non-Compliant Amendment. | | | | | | |
| <input checked="" type="checkbox"/> The fee has been calculated as shown below: | | | | | | |
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | 43 | - | 20 (+8 extra) | 0 | <input type="checkbox"/> x \$9.00 <input type="checkbox"/> x \$18.00 | \$0 |
| INDEPENDENT CLAIMS | 5 | - | 3 | 0 | <input type="checkbox"/> x \$42.00 <input type="checkbox"/> x \$84.00 | \$0 |
| APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR. | | | | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | <input type="checkbox"/> x \$140.00 <input type="checkbox"/> x \$280.00 ONE TIME | \$0 |
| | | | | | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | \$0 |
| <input type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated _____ by _____ month(s) for a fee of \$_____ so that the period for response is extended to _____ under 37 C.F.R. § 1.321. | | | | | | |
| <input type="checkbox"/> The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed check. | | | | | | |
| <input type="checkbox"/> The amount of \$_____ for the Amendment under 37 C.F.R. § 1.312(b) is included in the enclosed check. | | | | | | |
| <input type="checkbox"/> The enclosed credit card payment form to charge the amount of \$_____ covers the extension and claim fees. | | | | | | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed. | | | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| 14. <input checked="" type="checkbox"/> Customer No. 26263 | | | | | | |
| Dated: June 14, 2004 | | |  W. John Keyes, Ph.D. (Registration No. 54,218) | | | |

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| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | (6) RATE | (7) ADDITIONAL FEE |
| TOTAL CLAIMS | 43 | - | 20 (+8 extra) | 0 | <input type="checkbox"/> x \$9.00 <input type="checkbox"/> x \$18.00 | \$0 |
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| APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR. | | | | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | <input type="checkbox"/> x \$140.00 <input type="checkbox"/> x \$280.00 ONE TIME | \$0 |
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